Action Step	Benchmark	1st	2nd	3rd	4th	5th	6th	7th	8th
		11/04	2/05	5/05	8/05	11/05	2/06	5/06	8/06
A. Improve the safety of children	A.1.a. Define scope of CPS/intake standards								
and the efficiency of & consistency	A.1.b. Analyze WiSACWIS/make changes								
among CW programs system-wide	A.1.c. Issue intake standards								
by more clearly defining the scope	A.1.d. Provide training on intake standards								
of CPS cases and the intake and	A.1.e. Integrate policies into training				+BPP				
assessment standards that guide	A.2.a. Develop policy on multiple reports								
caseworkers	A.2.b. Review policy on case finding/Issue # memo								
	A.2.c. Analyze WiSACWIS/make changes								
	A.2.d. Provide TA/consultation								
	A.2.e. Integrate policies into training					+BPP			
	A.3. Develop WiSACWIS report								
B. Increase our ability to help	B.1.a. Update safety standards								
children remain safely at home by	B.1.b. Issue instructions/documenting safety								
updating policy and expanding	B.1.c. Refine tools in WiSACWIS				+BPP				
training and TA on safety assess-	B.1.d. Expand safety training curricula								
ment and safety planning	B.1.e. Provide TA and consultation								
	B.2.1) Develop Data Source for Measurement								
	B.2. 2) Conduct limited case review			+BPP					
C. Stabilize placements for children	C.1.a. Study counties with high re-entry rates		+BPP						
in FC and reduce the actual and	C.1.b.1)-2) Develop policy on trial home visits								
statistical re-entry of children into	C.1.b.3)-4) Implement policy and WiSACWIS					+BPP			
the FC system	C.1.c. Develop program responses to re-entry								
	C.2.a. Identify causes of FC disruptions			+BPP					
	C.2.b. Determine best response								
	C.3. Release Placement Handbook								
	C.4. Memo re Emergency Response Plan								
D. Increase the speed and efficiency	D.1. Develop policy on concurrent planning								
of placing children in permanent or	D.1.1) Issue # memo on concurrent planning								
adoptive homes when they can no	D.1.2) Provide training to staff on concurrent plans								
longer be safe with their parents	D.1.3) Check compliance through case reviews								
	D.2. Clarify permanency plan issues/#memo								

WiSACWIS

BPP

Training with BPP

OPEP

Other

Health Care Finance

Action Step	Benchmark	1st	2nd	3rd	4th	5th	6th	7th	8th
		11/04	2/05	5/05	8/05	11/05	2/06	5/06	8/06
	D.3. Info for perm plan reviewers								
	D.4. Issue numbered memo on TPR issues								
	D.5.a. Integrate FFA and AFA								
	D.5.b. Distribute FAFA								
	D.5.c. Update WiSACWIS							+BPP	
	D.6. Develop WiSACWIS report								
E. Maintain and support family con-	E.1.a. Issue policy on efforts to place siblings								
nections by updating and imple-	E.1.b. Provide TA/training on policy & law								
menting policies on sibling	E.2. Explore use of exceptional rate for siblings								
placement	E.3.1) Propose elimination of limit of 6 kids								
	E.3.2) Revise Ch. HFS 56								
	E.3.3) Issue revised Ch. HFS 56								
	E.4. Develop data sources for measurement			+BPP					
F. Maintain and support family con-	F.1.a. Develop policy on visitation								
nections for children in OOH care	F.1.b. Revise ongoing standards								
by clarifying policies on family par-	F.2. Develop procedures on ICWA								
ticipation in case planning, visita-	F.3. Develop data sources for measurement			+BPP					
tion and establishing paternity									
G. Assure that all parties in the CW	G.1.a. Numbered memo on ICWA								
system are aware of and are acting	G.1.b. Develop statutory language re ICWA								
in compliance with the requirements	G.1.c. Provide training on ICWA				+BPP				
of the Indian Child Welfare Act	G.1.d. Identify WiSACWIS ICWA changes								
	G.2. Hire ICW Specialist in BPP								
	G.3. Incorporate ICWA compliance in QSR process								
	G.4. Develop Data Sources for Measurement			+BPP					
H. Maintain and support family con-	H.1. Develop policy on engaging families								
nections for children in OOH care	H.2. Identify information shared with relatives								
by searching for relatives as	H.3. Policy on assessing safety with relative								
possible child placements	H.4.a. Conduct survey of tribes and counties		·	+OPEP					
	H.4.b. Analyze survey data								
		•				•			

WiSACWIS

BPP

Training with BPP

OPEP

Other

Health Care Finance

H.5. Develop data sources for measurement I. Enhance role of noncustodial parents/other family members as placement resources by developing policies procedures on engagement, including documentation of activities to locate, adjudicate and involve noncustodial parents J. Ensure that WI's Ongoing Standards effectively and appropriately guide workers in assessing and responding to the needs of children, parents and foster parents K. Increase the effectiveness of support for foster parents by improving their access to information, training and resources, including a foster parent handbook K. Increase the effectiveness of support for foster parents by improving their access to information, training and resources, including a foster parent handbook K. Increase the effectiveness of support for loster parents by improving their access to information, training and resources, including a foster parent handbook K. Increase the effectiveness of support for foster parents by improving their access to information, training and resources, including a foster parent handbook K. Increase the effectiveness of support for foster parents by improving their access to information, training and resources, including a foster parent handbook K. I.a. 1) Identify Postervice and support needs K. I.a. 2) Profile needs and identify gaps K. I.a. 3) Recommendations for meeting needs K. I.a. 3) Recommendations for meeting needs K. I.a. 4) Develop requirement for support plans K. I.a. 5) Provide training and TA K. 2.a. Instrument to assess child's needs K. 3. Adoption and FC Resource Center K. 4.a. Research mandated FP training K. 4b. 6. Develop data for measurement II. I. Identify policies impacting noncustodial parents I. I. I. Identify policies impacting neceds K. 5. Include into an accessing community res. K. 6. Develop data for measurement	Action Step	Benchmark	1st	2nd	3rd	4th	5th	6th	7th	8th
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WiSACWIS

BPP

Training with BPP

OPEP

Other

Health Care Finance

Action Step	Benchmark	1st	2nd	3rd	4th	5th	6th	7th	8th
		11/04	2/05	5/05	8/05	11/05	2/06	5/06	8/06
L. Pilot managed care program in	L.1.a. Develop managed care program/award RFP								
Milwaukee for children in FC that	L.1.b. Implement pilot in Milwaukee								
Will provide every child with men-	L.1.c. Review preliminary results of pilot								
tal, physical and dental health care	L.1.d. Present results to mental health workgroup								
	L.2. Develop data sources for measurement			+BPP					
M. Work with children's MH ex-	M.1.a. Agree on MH health practice CW								
perts and county/tribal CW agencies	M.1.b. Wkgrp/capacity improvement plan								
to develop a statewide policy and	M.1.c. Forum on WI model re MH								
CW worker support for the screen-	M.1.d. Circulate proposed policies								
ing and assessment of the MH needs	M.1.e. Update WI Model, WiSACWIS, training								
of children who have been abused									
or neglected									
N. Make family involvement in CW	N.1. Identify items for Ch. HFS 44								
case planning a centerpiece of Ch.	N.1.1) Issue interim numbered memo								
HFS 44 that governs practice and	N.1.2) Reactivate Ch. HFS 44 workgroup								
policy for children in OOH care	N.1.3) Complete draft for DHFS Administration								
	N.1.4) Send draft out for review								
	N.1.5) Conduct public hearings								
	N.1.6) Revise WiSACWIS as necessary				+BPP				
	N.1.7) Issue final rule								
	N.1.8) Provide training on rule								
	N.2. Identify items for Ongoing Standards								
	N.2.1) Issue interim numbered memo								
	N.2.2) Workgroup to revise standards								
	N.2.3) Complete draft of revised standards								
	N.2.4) Submit draft for review								
	N.2.5) Identify WiSACWIS revisions				+BPP				
	N.2.6) Issued revised Ongoing Standards								
	N.2.7) Provide training and technical assistance								>>>

6th

5th

7th

8th

3rd

4th

2nd

Health Care Finance

WISCONSIN PROGRAM ENHANCEMENT PLAN TIMEFRAMES

1st

Benchmark

Action Step

BPP

Training with BPP

OPEP

Other

		11/04	2/05	5/05	8/05	11/05	2/06	5/06	8/06
O. Move children more quickly to	O.1. Numbered memo on TPR laws								
permanence when they can no	O.2. Training on perm plan, ASFA, etc.		+BPP						
longer be safe at home by expedit-	O.3. Concurrent plan at 6 months								
ing the TPR when appropriate and	O.3.1) Issue numbered memo								
necessary	O.3.2) Provide training and technical assistance				+BPP				
	O.3.3) Determine compliance through case reviews								
	O.4. Analyze/implement TPR processing CIP								
	O.5. Memo on IV-E for legal services								
	0.6 Report on ASFA/TPR court proceedings								
P. Clarify responsibility/role of FPs	P.1. Process for judges to get input from FPs, et. al.								
in reviews and court hearings	P.2. Include role of FP in training and handbook						+BPP		
	P.3. Develop data for measurement		+BPP	>>>					
	•								
Q. Design and implement a compre-	Q.1. Write PDs and contract requirements								
hensive statewide QA Program	Q.2.1) Conduct limited case reviews								
built on the strength of existing pro-	Q.2.2) Review placement stability and re-entry								
grams and supportive of the efforts	Q.2.3) Determine baseline performance levels								>>>
of CW agencies to maintain an	Q.3. Develop case review model								
environment that encourages learn-	Q.3.1) Establish workgroup								
ing and program improvement	Q.3.2) Conduct focus groups								
	Q.3.3) Develop/finalize review format and tools								
	Q.4.1) BMCW conduct review for CY 2004								
	Q.4.2) Integrate BMCW/statewide data								
	Q.5.a.1) Train QA staff on CFSR reviews								
	Q.5.a.2), 3) Recruit and train peer reviewers								
	Q.5.a.4) Conduct reviews in 2-3 counties								
	Q.5.b. Conduct reviews in 15 counties								
	Q.6. Establish workgroup for performance reports								
	Q.6.1) Distribute reports to counties								>>>
	Q.6.2) Analyze and interpret data								>>>
	Q.6.3) Provide TA and training on reports				>>>				
	Q.6.4) Review QA results								
	/								

WiSACWIS

Action Step	Benchmark	1st	2nd	3rd	4th	5th	6th	7th	8th
		11/04	2/05	5/05	8/05	11/05	2/06	5/06	8/06
	D. H. H. L. C.	· DDD							
R. Expand the frequency, accessi-	R.1.a. Workgroup for requirements for training	+BPP							
bility and application value of CW	R.1.b. Review and recommend requirements								
training in Wisconsin	R.1.c. Training administrative rule					DDD			
	R.2. Coordinate with UW Social Work schools					+BPP			
	R.3.a. Training needs re: WiSACWIS	+BPP							
	R.3.b. Establish WiSACWIS training coordinator								
	R.3.c. Develop WiSACWIS training courses				+BPP				
	R.4.a. Alternatives for child welfare training			+BPP			>>>		
	R.4.b. Expand capacity of child welfare training			+BPP			>>>		
S. To ensure safety and permanence	S.1.a. Recruit and hire new child welfare staff								
for children and to increase consis-	S.1.b. Orient and train new staff								
tency in CW practice, enhance the	S.1.c. Implement PEP-related items with staff								
capacity of BPP to research and		1							
develop policies, to provide techni-									
cal assistance, and to respond to									
both systemic and case-specific									
issues									
T. Assess the capacity of the Wis-	T.1.a. Identify core CPS services								
consin CW system to respond effec-	T.1.b. Fill gaps in services and improve access								>>
tively to the safety needs of	T.2.a.1) Workgroup; develop workload tool (staff)								
children	T.2.a.2) Evaluate county staff workloads								
	T.2.b.1) Workgroup; develop workload tool (super.)								
	T.2.b.2) Evaluate county supervisor workloads								
	T2.c. Reports to determine staffing/caseload ratios						>>>		

BPP Training with BPP OPEP Other WiSACWIS Health Care Finance